# FICM *Thrive* Mentoring programme Application form

Please refer to the *FICM Thrive mentoring scheme guidance* document before completing this form. Completed forms should be submitted to [wicm@ficm.ac.uk](mailto:wicm@ficm.ac.uk)

|  |  |  |  |
| --- | --- | --- | --- |
| **Name:** |  | **GMC number:** |  |
| **Job Title:** |  | **Hospital/Trust:** |  |
| **Address:** |  | **Time in post:** |  |
| **Email:** |  | **Telephone number:** |  |

|  |  |  |
| --- | --- | --- |
| **Which of the following roles would you be interested in taking in this scheme?** (tick all that apply) | | |
| Mentor | Mentee |  |

**Tell us what you are hoping to get out of the scheme and any specific requirements that you have.**

Please see guidance for further instruction.

If you would like to be a Mentor, tell us about any relevant training and experience that you have.

Yes

**Do you consent for your details to be stored on the Faculty database and shared with other Mentoring scheme users that you are matched**

**with?**

# FICM *Thrive* Mentoring agreement form

Mentee Name:………………………………………………………………………………………

Mentor Name:……………………………………………………………………………………..

On the initial mentoring meeting please review and discuss the following agreement prior to signing. Each party should sign 2 copies. One stays with the mentee, one with the mentor. The mentor should scan and email their copy to [wicm@ficm.ac.uk.](mailto:wicm@ficm.ac.uk)

**Logistics**

Preferred method(s) of contact:

## Mentor: …………………………………………………………………………………………….

Mentee: **…………………………………………………………………………………………….**

**Session preparation**

The mentee agrees to send the mentor a brief agenda for the meeting 24 hours prior to the session including points to discuss and desired outcomes

The duration of the mentoring relationship will be for **12 months** during which there will be **at least 4 meetings**, with an option to continue for a further 12 months with both parties’ agreement.

**Boundaries**

The mentor is happy to be contacted between sessions. The best way to contact them is:

## …………………………………………………………………………………………………..

Both parties agree to respond to e-mails within [ ] days.

They are happy to be contacted by phone at the following times:………………………………………………………

For the duration of the mentoring relationship both parties agree to not engage in joint research activity, in peer review or selection committees assessing the mentee and mentor will not provide a reference for the mentee during the duration of the relationship. The mentor will not actively engage in discussions concerning the mentee’s promotion or appointment.

**Confidentiality**

Mentors are bound by a duty of confidentiality and have a duty to not disclose any information to a third party. This is irrespective of the organisational position of either the mentor or mentee.

All matters discussed are confidential except if information is disclosed which is illegal; which raises concerns regarding their health and wellbeing that are related to fitness to practice and the mentee refuses to seek help; or concerns regarding the health and

wellbeing of others. If there is a need to breach confidentiality the mentee will always be informed prior to doing so.

This commitment to confidentiality endures after the mentoring relationship has ended.

**Documentation**

Notes will be made and kept by the mentor and will not contain identifying information and will be stored securely.

It is the mentee’s responsibility to keep any desired records/action plans up to date and in a safe place.

**Leaving the programme**

If either the mentor or mentee decides at any time that they no longer wish to continue with the relationship they must inform the programme organiser and will not be asked to give a reason.

The mentor agrees to notify the scheme organisers at [wicm@ficm.ac.uk](mailto:wicm@ficm.ac.uk) when the mentoring relationship ends or gets renewed.

**Concerns**

[wicm@ficm.ac.uk](mailto:wicm@ficm.ac.uk) can also be contacted for escalating concerns.

|  |  |
| --- | --- |
| Date of issue **………………………………** | Date of renewal **…………………………** |
| Signatures:  Mentor: **………………………………………**  Mentee: **………………………………………** | Signatures:  Mentor: **………………………………………**  Mentee: **………………………………………** |

# FICM *Thrive* Mentoring action plan template

Mentoring action plan can be used to record the meetings held and document the actions arising from the meetings. Please complete during the meeting. It provides a summary of the meeting and creates action points for both the mentee and mentor.

Date and Venue: …………………………………………………………………………………………..

Name of mentee: …………………………………………………………………………………………

Name of mentor: …………………………………………………………………………………………

|  |  |
| --- | --- |
| **Goal with ‘SMART’**  **objectives** |  |
| Reality |  |
| Options |  |
| Way forward |  |
| Action |  |
| Time line |  |
| How can the mentor help? |  |

**Reflections/Progress summary:**

# FICM *Thrive* Mentoring programme Feedback form

Please complete the below meeting log

|  |  |
| --- | --- |
| Date of meeting: | Form of meeting (e.g. in person, telephone, videoconference) |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |

*(please insert more rows if necessary)*

## After participating in this mentoring programme…

|  |  |
| --- | --- |
| **I am more satisfied with my job than**  **before** | Strongly agree/agree/No  change/Disagree/Strongly disagree |
| **I feel more socially connected in the**  **workplace** | Strongly agree/agree/No  change/Disagree/Strongly disagree |
| **I feel more comfortable in the workplace** | Strongly agree/agree/No  change/Disagree/Strongly disagree |
| **I feel more certain of my career path** | Strongly agree/agree/No  change/Disagree/Strongly disagree |

**Please rate the following…**

|  |  |
| --- | --- |
| **Value of the mentoring programme for**  **you** | Excellent/good/fair/poor |
| **Overall quality of this mentoring**  **programme** | Excellent/good/fair/poor |
| **Usefulness of this mentoring programme** | Excellent/good/fair/poor |

## Have you found this experience useful?

**Could you provide us details of why you have or have not found the scheme useful?**

## Are you continuing with the scheme? If you answered no please let us know why.

**Would you recommend this scheme to colleagues? If you answered no please let us know why.**

## Any other comments?